



Town of Warwick

Orange County, New York
132 Kings Highway, Warwick, NY 10990
Email: williamroe@yahoo.com
Tel: (845) 986-3358

For Office Use Only:

Permit No.: _____

Assigned By: _____

Assigned Date: _____

Memorial Tree Program Application Form

Applicant Information:

Name of Family or Individual: _____
Mailing Address: _____
City: _____ State: _____ ZipCode: _____
Phone No.: (Day) _____ (Evening) _____
Email: _____

Type of Memorial:

Plant a tree in Memory Plan a tree in Celebration

Park Name:

(Check one)

Airport Park Union Corners Park
 Cascade Lake Park Waterfront Park in GWL
 Pine Island Park Wickham Woodlands

Desired Location within Park:

(Note: The Town of Warwick will make every effort to accommodate an applicant's requested park and location within that park.)

Tree Type:

(Check one)

Dawn Redwood Japanese Red Maple Norway Spruce River Birch
 European Beech Kanzan Cherry Potted Scarlet Oak Washington Hawthorn
 Flowering Crabapple Kousa Dogwood Red Maple
 Hybrid Elm London Planetree Red Oak

Plaque Information:

(Pls. **PRINT** the wording clearly,
24 character per line limit,
including spaces):

Line 1: _____
Line 2: _____
Line 3: _____
Line 4: _____

(Note: All wording must be approved by the Town of Warwick)

Program Fee:

\$400 New Tree Planting and Plaque

Payment Method:

Made personal check or cashier's check or money order (no cash accepted) payable to: **Town of Warwick**

Please complete the application form and return by post with check payment to:

Town of Warwick Parks Superintendent
Attn.: William Roe
132 Kings Highway
Warwick, NY 10990

I, the undersigned responsible designee, do hereby understand and agree to the rules of the Memorial Program as they have been presented to me. All routine maintenance of memorials will be provided by the Town of Warwick Parks Staff.

Signature: _____ Date: _____
Name: _____

Approved by: _____ Date: _____
Town of Warwick Parks Superintendent

Thank You for your support of our Memorial Tree Program!